Data Mining Activities for Bone Discipline – Current Status

J.D. Sibonga¹, R.A. Pietrzyk², R.A. Scheuring³, S.L. Johnston³, S.B. Arnaud³

¹USRA, ² Wyle's Life Sciences Group, ³ NASA

Charge to HRP Discipline Leads

- Support 2006 Programmatic Reviews of Evidenceto-Date for Human Research Program
- Identify GAPS in the evidence that would substantiate a skeletal health risk during and after spaceflight missions.
- Engage in Data Mining Activities to address GAPs: access reviews of medical data and flight analog data, propose additional measures and specific analyses.

Data Mining Activities and Identified GAPs

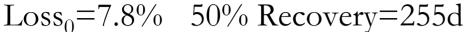
Recent reviews of flight & flight analog data have partially addressed GAPS

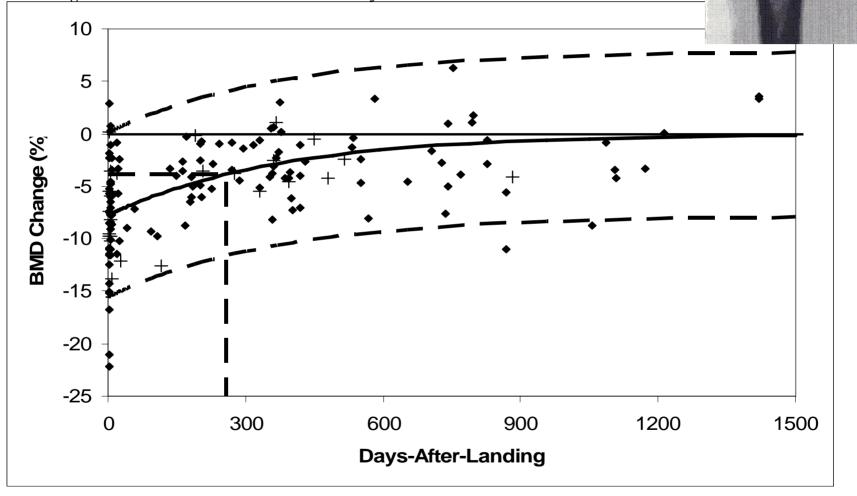
- B1: Is bone strength completely recovered with recovery of BMD?
- B4: Incidence of IVD injury following spaceflight?
- B5: Current renal stone formation knowledge
- Ground-based evidence: Review of bed rest studies conducted at Ames Human Research Facility

Recovery of spaceflight-induced bone loss: BMD after long duration missions as fitted with an exponential function. Sibonga JD, Evans HJ, Sung HG, Spector ER, Lang TL, Oganov VS, Bakulin AV, Shackelford LC, LeBlanc AD. Bone 41(6):973-978, 2007.

- Recovery of bone mineral that was lost during spaceflight was tracked by <u>evaluation of the repository</u> of astronaut BMD medical data
- Data were <u>fitted to a mathematical function</u> to describe the asymptotic increase in BMD during postflight period
- Uncertainty in mathematical fit was reduced by supplementing medical data with research measurements and cosmonaut data
- Mathematical fit provided an index of <u>"50% recovery</u> time" which was used to relate the temporal recovery of BMD

Trochanter





NOTE: BMD accounts for only 50-70% of bone strength.

Report Conclusions (Sibonga et al)

- Model predicts that long-duration crew members recover BMD lost during spaceflight with substantial restoration occurring within 3 years of return – recovery period > duration to induce bone loss.
- DXA BMD <u>needs to supplemented</u> with other measurements (e.g., structural indices by QCT) for the complete assessment of <u>bone strength</u> restoration.

Renal stone formation among astronauts. Aviat Space Env Med. 78(4):A9-13, 2007. Pietrzyk RA, Jones JA, Sams CF, Whitson PA.

- Retrospective analysis of urinary data from US space shuttle crew members.
- 24-hour urine specimens were collected pre-launch (~L-10) and immediately post-landing.
- Analysis: Urine characteristics of renal stone formation and relative supersaturation of stoneforming constituents
- Pre- and postflight data were stratified (see Data Tables) for Shuttle crew members (n=329-332).
- 14 kidney stone episodes in US astronauts but urine analysis for only 9 subjects; majority of stone material recovered after flight was of mixed calcium oxalate

Mean Values for Urinary Biochemical Parameters in Crewmembers During Short Duration Space Flight

Parameter	Preflight	Postflight	р
	(n=332)	(n=339)	
Total Volume (L/d)	2.1 ± 0.06^{a}	2.0 ± 0.06	NS
<1 L/d:	13%	13.1%	
<1-2 L/d	38.9%	46.2%	
>2 L d	48.2%	40.7%	
Oxalate (mg/d)	38 ± 0.9	37 ± 0.9	NS
Calcium (mg/d)	183 ± 5	234 ± 6	NS
pН	6.05 ± 0.02	5.79 ± 0.03	<0.05
Citrate (mg/d)	714 ± 16	629 ± 18	NS
Magnesium (mg/d)	116 ± 3	99.0 ± 2.2	NS

^aMean ± SEM; Preflight urines collected 10 days before launch and postflight urines collected on landing following missions of <16 days.

Mean Values for Relative Saturation of Stone-Forming Salts in Urine from Crewmembers During Short Duration Space Flight

Parameter	Preflight	Postflight	Р
	n=332	n=329	
Coloium Ovoloto	4 50 . 0 002	2.26 . 0.07	40.0E
Calcium Oxalate	1.53 ± 0.06^{a}	2.26 ± 0.07	<0.05
Brushite	1.25 ± 0.06	1.00 ± 0.06	< 0.05
Sodium urate	2.41 ± 0.11	1.42 ± 0.07	< 0.05
Struvite	3.05 ± 0.83	3.69 ± 2.21	NS
uric H+	1.69 ± 0.08	2.27 ± 0.09	< 0.05

^aMean ± SEM

Prevalence of Biochemical Abnormalities in Urine in Astronauts Before and Following Short Duration Space Flight

Abnormality	Pre-flight	Post-flight	
Hypercalciuria (>250 mg/d) 20.8%	38.9%	
Hypocitraturia (<320 mg/d)	6.9%	14.6%	
Hypomagnesuria (<60 mg/	/d) 6.0%	15.8%	
Urinary supersaturation (>2.0)			
Calcium oxalate	25.6%	46.2%	
Uric acid	32.8%	48.6%	
Brushite	19.3%	13.1%	
Sodium Urate	44.9%	25.8%	

Report Conclusions (Pietrzyk et al)

- Prediction of stone formers amongst astronauts still uncertain at this time.
- Greater potential for renal stone formation appears to be <u>associated</u> with increased relative saturation values.
- Spaceflight effects can alter urine biochemistry although risk may be present before flight.
- Increasing occurrence of kidney stone episodes may be related to increasing mission durations.

Johnston SL, Campbell MR, Wear ML, Birzele JA, Hamm PB. Increased incidence of herniated nucleus pulposus among astronauts. Submitted manuscript.

- Herniated nucleus pulposus is known to occur in aviators exposed to high G environments and has occurred in astronauts
- Review of incidence rate in astronauts (LSAH) vs. matched controls indicates higher occurrence in astronaut population
- Higher incidence in high performance jet pilots, at cervical location and within first 12 months of return

Summary of Rates of Herniated Discs

Ref. Population	# HNP events:	HNP	HNP Rate	P value vs.
	# Astronauts	Location	Per 1000	LSAH Control
			person-yrs	Pop
Astronauts	33: 24		5.34 : 3.89	
Median Age =45.4		14 cervical	2.26	< 0.004
yrs		19 lumbar	3.08	
HPJA Astronauts	26: 19	9 cervical		
		17 lumbar		
non-HPJA	7: 5	5 cervical		
Astronauts		2 lumbar		
LSAH Control	35:34 patients		2.23:2.20	
population		3 cervical	0.19	
Median Ave =45.6		32 lumbar	2.02	
yrs				
US Army Aviators ¹ ,	132		1.60	
not all HPJA		34 cervical	0.41	
Age range 40-44 yrs		98 lumbar	1.19	
General male	466			
population ²		ND Cervical		
30-60 yrs		423 lumbar	1.25	
(Ave=41.5)				

^{1:} Mason KT et al Herniated nucleus pulposus: rates and outcomes among US Army aviators. Aviat Space Environ Med. 1996: 157(9):491-493.

HNP: Herniated Nucleus Pulposus, LSAH: Longitudinal Study of Astronaut Health. HPJA: High Performance Jet Aircraft, ND: Not Determined

^{2:} Bruske-Hohlfeld I et al. Incidence of lumbar disc surgery. A population-based study in Olmsted County, Minnesota, 1950-79. Spine. 1990. 15(1):31-35.

Report Conclusions (Johnston et al)

- Incidence of both cervical and lumbar HNP is increased (2.4x) in astronauts compared to control population (matched by age and BMI)
- Risks factors include: history of high performance jet aircraft exposure (80% of HNP), cervical location (12x) and within 12 months (19.7x) after return
- Pathophysiology appears to be expansion of disc volume in response to axial unloading and damage to annuli fibrosus upon exposure to high and higher G with return to earth.
- Biochemical changes in disc could also be a factor

Bed rest experiments at Ames Research Center. Studies relevant to skeletal

health risk, reviewed and summarized by SB Arnaud, M.D.

TITLE/PI	UNLOADING	EXPERIMENTAL DESIGN
(EXPERIMENT #)	DURATION	
Exercise Countermeasures for Bed	30 d	Comparing high-intensity isotonic and
Rest Deconditioning/ Greenleaf, J. E.		isokinetic exercise as countermeasures to
(HR 63)		multiphysiological deconditioning.
Life and Microgravity Sciences	17 d	Ground-based pilot study, designed to mimic
Spacelab Mission: Human Research		the Spacelab flight protocols for identifying
Pilot Study/Arnaud, S.B. (HR 146)		the functional, metabolic and neurological
		characteristics of muscle weakness and
		atrophy during space flight.
Dietary Sodium Effects on Bone and	7 and 30	Contrasting 30-day study with restricted
Calcium Metabolism/ Arnaud, S.B.	days	dietary salt to a 7-day bed rest study of
(HR 159)		volunteers fed normal salt diets on calcium
		excretion.
The effect of bed rest on bone	7 days	Determine the response of human bone to a
histology and the calcium endocrine		brief period of unloading as determined in
system in adult men./Arnaud, S.B.		fluorochrome-labeled bone biopsies and by
(HR 71)		biomarkers of calcium metabolism.

Future DMAs

- "Epidemiologic analyses of risk factors for bone loss and recovery related to longduration flight." Study proposal in review. Evaluation of flight and medical data for risk factors, aside from weightlessness, that influence bone loss and recovery; compare observed changes in crew members with a well-characterized, age-matched population-based cohort (Rochester Bone Health Study).
- "Data Mining Activity to evaluate the risk for vertebral morphological deformities with spaceflight." Study proposal in definition phase. Characterization with VFA to assess if spaceflight exposure predisposes crew members (earlier incidence and prevalence) to morphological deformities in over life time.

Closing

 Data mining activities and data analyses are an ongoing process as the HRP Evidence Base Book is updated with new information and research.

 Such activities are critical as we begin to frame the skeletal health risks during Exploration Missions.